



218 MACHLIN CT
WALNUT, CA 91789

UNIS CREDIT CARD AUTHORIZATION & PERSONAL GUARANTEE

VISIT UNISCO.COM | QUESTIONS? CALL 800.486.4726

CREDIT CARD AUTHORIZATION

I hereby knowingly and irrevocably authorize Unis Transportation to charge my credit card for: ALL SHIPPING CHARGES ALL PASS DUE SHIPPING CHARGES ALL PASS DUE SHIPPING CHARGES

Shipments tendered by UNIS originating from or destination to the company or person named above. Please Note: The cardholder must be one of the owners/officers named on the application. This authorization will be used upon approval of your account. Please note that the credit card information will be kept confidential and the signature will be kept as your authorization for UNIS to debit the amount on the credit card.

Card Holder's Name (as shown on statement)			Company Name	
Credit Card Billing Address			Title of Cardholder	
City	State	Zip	Phone #	
Credit Card #			Type of Card <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> AMEX (Must provide copies of front and back of the credit card)	
Expiration Date (MM/DD/YYYY)	Credit Card 3-Digit Security Code		Name of Bank issuing Credit Card	Issuing Bank's Toll Free #

The credit card account information provided herein shall be used only for the intended purpose as authorized. Cardholder shall indemnify and hold UNIS harmless from all loss, damages, expense or liability in connection with such authorized use of the above said credit card. Any use by UNIS is limited to the shipping charges to the Cardholder.

I certify that the credit card account listed below is valid and that sufficient available credit exists to cover all charges made. I also agree to notify UNIS when specific information changes regarding the validity of this credit card. If this credit card account is deemed invalid, while attempting to complete payment for an unpaid delivery, I agree to send payment immediately upon notification, or provide us with valid credit card information. A \$35.00 fee will be charged for invalid credit card transactions.

PERSONAL GUARANTEE

This agreement is made between Guarantor and Unis Transportation in consideration of any and all extensions of

Credit to:	The customer, whose address is:	City	State	Zip
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Guarantor unconditionally guarantees full and prompt payment when due, with no limitation on liability, of any and all existing or future indebtedness or liability of Customers to UNIS including but not limited to all finance charges, reasonable attorneys and collection fees and court cost. Guarantor waives notice of the acceptance of this Guaranty by UNIS and the extension of any credit by UNIS to Customers. Guarantor waives presentment, protest, notice, demand, or otherwise enforce payment by Customer. I agree that suit for the balance owned will be brought in Los Angeles County, State of California. UNIS may sell, release, surrender, exchange, compromise, waive, subordinate, or modify the indebtedness or liability of Customer to UNIS, without notice to Guarantor and without affecting Guarantor's liability to UNIS. This Agreement shall be binding upon the Guarantor, and his/her respective heirs, Executors, Administrators, legal representatives and successors and assigns, and shall inure to the benefit of Unis Transportation and its successors and assigns.

UNIS rights and remedies shall not be modified, limited or waived by any representation, promise or agreement made, of by any course of conduct by UNIS the date of this Agreement, unless evidence by a written document signed by South Bay.

If any provision of this Agreement is declared unenforceable or invalid in whole or in part, for any reason, the remaining provisions shall continue to be effective.

The Laws of the State of California shall govern this Agreement. Guarantor agrees that any process served on Guarantor(s) shall be sufficient if mailed to the address listed below or to Guarantor's resident by certified mail, return receipt requested.

Recommends:

Signature of Authorized Officer/Principal	Title	Print Name of Guarantor	Date (MM/DD/YYYY)
Mailing Address		Social Security #	Phone
City	State	Zip	Driver License #
			Expiration Date (MM/DD/YYYY)